



ESSENTIAL STRENGTH EQUIPMENT FOR THE MODERN PT PRACTICE

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Essential Strength Equipment for the Modern Physical Therapy Practice

With physical therapists promoting ourselves as the “movement specialists” it is crucial that we understand how to progressively load our patients in a functional approach. Therapeutic exercise is such a foundational aspect but often results in under loading of patients because typically the heaviest piece of equipment in the gym is elastic tubing and light dumbbells. In the following you will find the Top 10 pieces of strength equipment for the modern PT practice and examples of exercise selection based on clinical reasoning.

This eBook brought to you by the Institute for Clinical Excellence’s Fitness Athlete Division. Visit www.ice.physio for information on available courses to improve your clinical skillset for fitness athletes.

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1. Barbell/Bumpers/Rack

Developing relative strength is absolutely necessary for all patients and your body just isn't heavy enough. Before trying to come up with the latest and greatest new rehab exercise, make sure your patient is strong and efficient with the basics. Squats and deadlifts are a good start. Now I know what you're going to say, aren't deadlifts bad for your back? NO. Several research studies support that deadlifts are good for back pain when done with proper form (see "[Treating Low Back Pain Using Deadlifts](#)").



Using a [barbell](#) has endless limits to strength gains. Not to mention, the barbell is a highly adaptable piece of equipment. Still not convinced? The barbell is useful for all of the following:

- Versatile with natural multi-joint movement patterns – squats, deadlifts, bench press, cleans, push-press
- Develop motor control and stability
- Injury prevention
- Easy to progressively load
- Empowerment
 - This one may be the most important. While everyone may not want to have a 500lb back squat – there's an undeniable sense of empowerment when individuals start to find everyday movements easier because they're stronger. They no longer fear positions that were once painful or avoided because they didn't want to "throw their back out"

Not sure where to start?

1. Squats
 - Any kind of squat you chose to perform is a staple for strengthening the quads, hips and lower back.
2. Deadlifts
 - Perfecting the hip-hinge movement pattern is essential for functional movements and optimal performance.
3. Step-Ups
 - Great when needing to work around knee-pain.
4. Hip Thrusts
 - Targets weak glutes by training through full hip extension and developing lumbopelvic control, protecting yourself against lower back pain and hip dysfunction.

Squat



Chose a bar placement based on desired movement pattern.

- Low bar you are able to sit back farther, decreasing torque on the knees.
- High bar placement allows for the torso to be more upright and decreasing hip torque.
- Front squat - by distributing the weight more anteriorly, the front racked position shifts the focus onto thoracic strength and core stability, as well as decreasing torque on the hips.

Regardless of sumo or conventional deadlifts, there are a couple of consistent key points in order for your patient to build a stronger back and posterior chain.

- Lats engaged pulling the bar closer into the body.
- Shins fairly vertical with barbell over the middle of their foot.
- Hips starting below shoulders, shoulders slightly over the bar and both moving as one unit when you pull.

Deadlift



Step Ups



Place one foot up on a stable elevated surface with the other on the ground behind the box. While keeping the shin vertical, use hip and knee extensors to move upright.

- A common fault is to use the calf muscles to push off of the extended leg on the ground, taking the load off the quads and hips. To avoid this, have the patient lift their toes up and only tap with the heel.

Start with shoulder blades and arms across a bench and feet about shoulder width apart with knee angle around 90 degrees. Bar is placed at the crease of the hips, oftentimes supported with a foam pad. Begin by bracing your core as you drive through the middle of your foot and into FULL hip extension.

Hip Thrusts



2.Landmine (LM)

The [landmine](#) has become more popular because it resembles free weight training in that it allows for freedom of movement while still having a fixed contact point, creating some extra stability. This provides a unique arc motion that is unlike any other piece of strength equipment.



Five Ways to Train with Landmines:

1. Reverse Lunge
 - The LM offers a counterbalance making it easier for your patient to step back farther, creating a more vertical shin and decreasing the force at the knee joint.
2. Single Leg Deadlift
 - Allows you to crush through side-to-side imbalances and removes the stability challenge when performing with dumbbells or kettlebells.
3. ½ Kneeling Press
 - Focuses on overhead strength without using full ROM, allowing you to train shoulder strength in many rehabbing injuries.
4. Single Arm Row
 - Toss aside the V-grip and save your low back. This variation makes for a good burn through the upper back and puts your core to the test with a rotary force.
5. Anti-rotations
 - The transverse plane is often forgotten. Anti-rotation exercises are crucial to develop a strong core that can resist or handle torque during daily activities and sports.

Reverse Lunge



Hold with both arms at chest level or with one arm extended by hip on the same side as stepping leg.

- Keep feet shoulders width apart and maintain balance on front leg before driving opposite leg backwards.
- Remain upright as you descend.
- Drive front leg through the ground while pushing through the back leg as needed to return to standing.

Hold weight with one arm extended by the hip of the leg that will be raising back. Bend at the hips, while moving the torso and the leg at the same time.

- Patients will often rotate at the hips due to a lack of hip and core stability. To prevent this from happening, instruct them to focus on keeping their navel pointed directly at the ground.

Single Leg Deadlift



Kneel on the ground on the same side as the arm that will be pressing. The end of the barbell should be placed right in front of the anterior shoulder. Using your lats to pack your shoulder and provide a stable platform to press from, drive the bar straight out.

- The elbow should stay in a straight line with the path of the barbell.
- The torso should remain upright throughout the entire movement.

½ Kneeling Press



Set up perpendicular to the landmine with the working arm closest to the barbell, holding on to the sleeve. Resist the rotational force created from the positioning by bracing your core.

- Allow the scapula to move through its full range of motion by letting it drift forward as the arm is extended and retracting it as you begin the pull.

Single Arm Row



Facing the landmine with both hands interlocked around the sleeve of the barbell and the arms extended out in front of the chest. Keep the arms straight and rotate the bar down to the outside of your hip. Use your obliques to rotate the bar from the hips back to the starting position

- Prevent the torso from flexing or laterally bending while performing this movement.

Anti-Rotation



3.Kettlebells

[Kettlebell](#) training has carryover to everyday movements, teaching your body how to deal with similar forces encountered during sports and activities of daily living. There are a variety of ways to approach using KBs based on the desired effect, such as to improve endurance, power, strength, cardiorespiratory fitness, and build coordination.



Training with a KB is practical for any age with numerous benefits:

- Small and compact – not taking up too much space in the clinic
- Less intimidating for your patients
- Full body workouts with variety to choose from
- Challenges grip more than barbells or dumbbells
 - Grip strength has been shown to be an important indicator to overall health
- Easy to use

Best Rehab Exercises Using Kettlebells:

1. Bottoms Up Press
 - Great for shoulder rehab needing to focus on stability.
2. Goblet Squat
 - Offsets balance issues by shifting more weight anteriorly, allowing the patient to sit back and stay more upright.
3. Arm Bars
 - Active control of the entire shoulder along with hitting thoracic mobility during rotation.
4. Mixed Carries
 - Challenges frontal plane and allows development of proper trunk and hip activation to maintain stable position.
5. Turkish Get Up
 - Requires shoulder stability, core strength and hip mobility.

Bottoms Up Press



This challenging variation of the overhead press can be done standing or in the half-kneeling position. Grab the handle so that the mass of the KB is above it and is in line with your forearm. Push the KB overhead focusing on keeping it as close to your ear as possible.

- The nice thing about this exercise is that, because of the positioning, if there are any technical flaws, the KB will fall over.

Grasp the KB “by the horns” by gripping around each side of the handle. Wedge the KB into position on the chest by activating your lats. Descend into the squat allowing your elbows to trace inside the knees until you reach the bottom of the position.

Goblet Squat



Arm Bars



Lay supine on the ground with the arm flexed so that the KB is held directly over the shoulder. Actively pack the shoulder and maintain the stability as you cross and reach the top leg over to roll into a side-lying position. Continue to roll as far as you can to focus on your thoracic mobility while keeping the shoulder in a stable position.

Loaded carries can be performed in a variety of ways. You can hold them overhead, down by your sides, in the front rack position, or any combination. These can be performed bilaterally or unilaterally to test both shoulder stability and trunk stability in multiple planes.

Mixed Carries



Turkish Get Up (TGU)



Start in a supine position, with one arm out to the side at 45 degrees and the other overhead, holding the KB. The knee on the same side of the KB is bent, with your foot flat on the ground. With keeping arm straight and shoulder perpendicular to the ground, perform the following:

- Go from supine up on to the forearm and then forearm onto hand.
- Drive hips up and then sweep the opposite leg backwards into a half-kneeling position.
- Remove hand from the ground and stand up.
- Reverse the movement and return to the starting position step-by-step.

4.Sled

The [sled](#) often gets overlooked but the advantages are immeasurable. Let's take a look at why you need this in your rehab clinic and how your patient's performance will skyrocket.

- Simplistic and easy to use, not requiring too much coordination
- Little risk of injury and less impact on the joints
- Multipurpose – conditioning, speed, strength, fat loss
- Similar mechanics used with gait and running so it will have substantial carryover
- Avoids eccentric loading which makes it a great modality for recovering faster without the dreaded soreness



Doesn't matter how, just do it!

1. Sled push
 - Perfect for runners and teaching them how to drive their feet into the ground and develop a powerful leg drive.
2. Backwards Sled Drag
 - While this one can be used to develop the entire posterior chain during training, it can be resourceful in therapy to reinforce terminal knee extension in knee injuries.
3. Upper Body Drags
 - A fantastic progression from banded or weighted Y/T/I's that will challenge shoulder stability and posterior cuff muscles.

Sled Push



Stand facing the sled and grasp the uprights with the elbows locked out or bent and in-line with body. The torso should be angled forward with your legs in a staggered stance. Drive through the front leg, in a similar fashion as sprinting, to move forward. Continue cycling legs.

- Using a heavier weight will focus more on strength development while a light weight will bias more speed/force production.

Attach straps (such as a TRX or tow straps) to the front of the sled. Face the sled and hold onto the handles, while sinking backwards to load the hips and posterior chain. Reach one leg back and drive through the heel until the knee is fully extended to move the sled. Repeat with the other leg in a cyclic manner.

- Make sure to keep the scapulae locked in to prevent the weight from pulling your arms forward.

Backwards Sled Drag



Upper Body Drags



Assume the same set-up as the backwards sled drag. With the elbows straight and arms abducted to 90 degrees, back-pedal while keeping the arms in line with the body.

- Prevent the arms from being pulled forward through isometric hold of the upper back and posterior cuff.

5. Adjustable Bench

An adjustable bench would play a vital role in the clinic. When utilizing the variety it has to offer, you'll make sure your patient walks away with a bulletproof upper body. Being able to change the angles you're training at makes it an efficient device to target specific muscle groups and better individualize the exercise to your patient's needs.



Give These A Try:

1. Incline Press
 - Able to target the chest and take pressure off the shoulders when pressing. This can be a great way to progress back to an overhead press with shoulder injuries.
2. Chest Supported Row
 - Removes stress from the low back and doesn't allow individuals to use momentum, specifically isolating the upper-mid back.
3. 3 Point Row
 - Increased demand on the core to resist rotation, teaches your patient to control scapular protraction and retraction/depression, and requires RTC stabilization.
4. Incline Curl
 - Challenges controlled shoulder extension and the ability to keep the shoulder blade down and back without anteriorly tilting.

Incline Press



Hold the weights directly over the shoulder, with the elbows extended. Drive your scapulae into the pad by pulling them down and back. Slowly lower the weights, making sure to keep the forearms perpendicular to the ground, until they reach shoulder level. Push your arms straight up until your elbows are fully extended.

Place your torso on an inclined bench in a prone position with the feet firmly planted on the ground. Allow the scapulae to protract completely with the arms extended in the starting position. Begin the row by forcefully retracting and drive the elbows back until they are in line with the torso.

Chest Supported Row



Position yourself perpendicular to the bench. Place one hand on the bench and have both feet planted on the ground with a slightly wider than shoulder-width stance. Holding onto a DB or a KB, pull your elbow back until the upper arm is parallel to the torso.

- Moving the elbow close to the body or farther away from the body can change the line of pull and put more stress on different muscles.

3 Point Row



With the bench positioned at a moderate incline, begin by sitting on the bench with the arm extended straight down so that it is perpendicular to the ground. Bend the elbow until it is fully flexed and then continue by flexing the shoulder. Control the weight eccentrically as you lower into the beginning position.

- Keep the scapula locked down throughout the entire movement to focus on preventing excessive anterior tipping.

Incline Curl



6. Resistance Bands

[Resistance bands](#) can offer a one of a kind training stimulus when compared to free weights. Instead of providing constant resistance, they are able to ramp up the intensity as range of motion increases and the band is stretched. In addition to loading movements, bands can also be used for adding assistance to exercises that your patients otherwise wouldn't be able to perform.

Bands offer several advantages over free weights:

- Cost-efficient
- Different intensities making them great tools for any training level
- Small storage space
- Lightweight
- Eliminates gravity
- Can combine with other equipment



Check These Out:

1. Spanish squats
 - Alternative way to isolate the quads and load the squat movement with patient's having patellofemoral pain.
2. Supine banded row
 - Reinforces the shoulder packed position with individuals having anterior shoulder pain and trouble controlling shoulder extension.
3. Kick downs
 - Good for glute activation in similar gait or running pattern while forcing the patient to fight the torque at the hips.
4. Quadruped thoracic rotation
 - Assists further rotation when reaching through and resists when rotating up-making this a fantastic drill for thoracic spine mobility and strength.
5. Terminal Knee Extensions (TKEs)
 - Strengthens quad activation in order to regain full knee extension to prevent abnormal gait patterns and stress on the patella tendon.

Spanish Squats



Attach resistance band around a stable surface and step into each side of the band. Place the band right below the knees and step back to create a good amount of resistance. Squat down sitting hips back and keeping shins vertical to load the quads.

Lie supine on the floor with knees bent and feet flat. Loop a band around a rig or fixed structure above you at chest level. Take hold of the band and allow it to pull your shoulder blade up into protraction. Before rowing, pin your shoulder blade down flat against the ground, then pull the band down towards your chest.

Supine Banded Rows



Kick Downs



Fixate a band at hip level so that it is running parallel to the ground. Place one foot across the top of the band with hip and knee flexed in 90/90 position. Drive your foot down and back against the resistance until your hip and knee is extended. Control the movement back into the starting position.

Attach a resistance band to a rig at ground level and get set-up in a quadruped position far enough away to allow some tension. Take hold of the band with the hand furthest away and pull close into your chest. Rotate through the thoracic spine, bringing elbow up towards the ceiling. Then return back down allowing the band to pull you all the way through.

Quadruped Thoracic Rotation



- Reach through and pull band back in every time.

Terminal Knee Extensions



Attach the band to a rig or stable lever and step into it, allowing the band to rest just distal to the posterior knee crease. Step back to create tension and allow your knee to bend forward. Then push back into the band, fully extending the knee and squeezing the quads. Return back to knee bent position slowly and controlled and repeat.

- Carefully consider this technique in post-op patients or move the band higher to take out the mobilization on the tibia.

7. Suspension Trainer

[A suspension trainer](#) is a unique piece of equipment that gives you the ability to load movements, assist with movements, or provide a more challenging base to perform movements on. Unlike a barbell or kettlebell, suspension trainers use your bodyweight as the resistance, eliminating any compressive forces from external load. Typically used for upper-body strengthening, core stability, and to provide assistance for more regressed exercise selections, the suspension trainer provides a lot of value with an extremely small footprint.



Add These to Your Rehab:

1. Abdominal Fall Outs
 - Will challenge your anterior core strength and ability to keep lumbar neutral while moving arms overhead.
2. Row variations
 - Utilizes all of your pulling muscles in the upper back with the added advantage of hitting your forearms and grip strength along the way, all while using bodyweight.
3. Face Pull with External Rotation
 - Great exercise for strengthening the scapular muscles as well as the external rotators of the posterior cuff.
4. Assisted Single Leg Squat
 - Allows you to train single leg stability and strength comparable to everyday activities.

Abdominal Fallouts



Start upright by facing the straps and grabbing hold of the handles at about waist height. Come up onto your toes. Keeping your arms straight and core braced, lean into the suspension straps and move closer to the ground while your arms raise up overhead.

- Maintain a neutral spine.
- Shoulders should be the only joint moving.
- Return to starting position.

Many progressions of a row can be done by changing the angle of your body. The more upright you are, the easier it will be.

- Walk yourself into an inclined position with arms fully extended and perpendicular to your body at chest level.
- Pull yourself up into the handles, leading the movement with the shoulder blades and maintaining straight alignment.

Rows



Face Pull + ER



Start in similar position as rows (you will want to be more upright for this one). Pull the handles towards your chin, keeping elbows in line with the shoulders. Next, rotate your hands upwards as if you were signaling a field goal. Slowly rotate backwards and let your elbows extend.

Hold the handles with your elbows close to your side and balance on one leg. You can either hold the opposite leg out in front or tuck it behind the leg balancing. Slowly bend the knee and sit hips back into a squat. Drive through the entire foot to return to standing.

Assisted Single Leg Squat



8. High-Low Cable

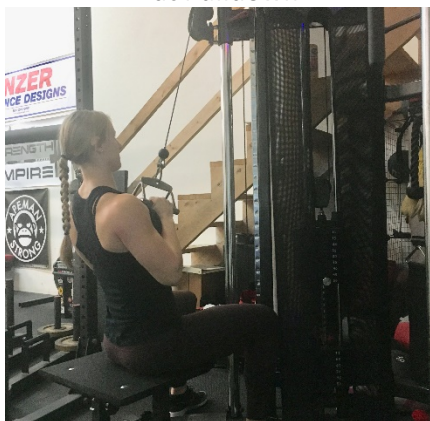
Cable machines offer a lot advantages in developing strength that are unmatched by other implements. Cables provide a consistent resistance throughout the full range of motion, making them an ideal choice to load single joint exercises for targeted strengthening. Having the ability to adjust the height of the pulley allows you to load a movement patterns at a variety of angles. While this machine can be relatively pricey and take up a little more space than other pieces of equipment, the constant resistance and ability to isolate specific muscles makes it a worthwhile investment.



Keep These in Mind:

1. Lat Pulldown
 - Hits various muscles throughout the upper back with the same movement pattern as a pull-up but without having to support your entire body weight.
2. Pallof Press
 - Will build a resilient core that will teach your patient how to brace properly and withstand forces from all directions.
3. Chops/Lifts (PNF)
 - Mimics diagonal patterns seen in sports and daily life with emphasis on stabilizing the spine before movement to effectively generate power.
4. Single Arm Row
 - The one-arm version of the row will allow you to overcome strength asymmetries as well as train your stabilizing muscles to create a sturdy shoulder complex.

Lat Pulldown



Multiple attachments can be used to perform the lat pulldown with various grip positions (neutral/pronated/supinated).

- Sit on a box just slightly behind the cable attachment with feet flat on the ground.
- Start with arms straight and torso upright.
- As you pull your shoulder blades down and back, move the bar towards your chest.

Set the cable machine at about chest height and keep arms close to your body as you step out towards the side to create tension perpendicular to the cable. Keep knees slightly bent and extend arms away from yourself in a straight line without allowing them to move inward. Return arms back to torso.

- Work both side to resist rotational forces in either direction.

Palloff Press



Chops/Lifts



Chop – Set up in a half-kneeling position with the *inside knee up*. Reach up and across and pull the rope down and across your body in a diagonal pattern while keeping arms straight.

Lift – Set up in a half-kneeling position with the *inside knee down*. Reach down and across and pull the rope up and across your body in a diagonal pattern while keeping arms straight.

- Keep the torso tall without flexing or rotating.

Can perform either standing or sitting on a stable surface. If standing, keep knees slightly bent in mini squat position. Grab the single handle attachment with the palm facing down and arm fully extended. Leading with the scapula, drive the elbow backwards while keeping the arm close to your body and rotating your hand to a neutral position.

- Keep the torso stationary to maximize the load through the upper body.

Single Arm Row



9. Sliders

The least expensive of this list, sliders have a variety of uses and take up virtually no space at all. Sliders make the leg or arm that is on them friction-less which can either decrease the stability of an exercise or eliminate the ability to use a dominant side in some split-stance exercises. Whether you are adding some extra difficulty or shifting the emphasis of core stability staples like planks and bridges or using them to change your center of gravity for balancing exercises, sliders are a versatile piece of equipment while not breaking the bank.



Mix Up Your Training:

1. Body saws
 - Changing the lever by moving backwards and forwards will take this core exercise to the next level by challenging your stability in a lengthened position.
2. Multi-Directional weight transfers
 - Go-to exercise for teaching an individual to weight shift fully onto one leg while challenging balance and strengthening the hips.
3. Reverse lunges
 - Improves strength and stability in the lower body as well as increasing hip flexibility and mobility.
4. Hamstring eccentrics
 - Excellent way to regain strength and directly load the hamstrings without killing the low back or knees.
5. Single arm slides
 - Low impact bodyweight exercise that provides a unique training stimulus by challenging shoulder mobility and stability.

Body Saws



Starting in plank position with your forearms on the ground, place your feet on the sliders. Posteriorly tilt your pelvis and squeeze your glutes as you use your arms to push your body backwards. Push yourself back as far as possible while still keeping your torso parallel to the ground then use your arms to pull you back to starting position.

With one foot on a slider and the other firmly on the ground, place your weight on the leg that's on the ground with knee slightly bent. Put just enough weight onto the other leg to keep in contact with the slider. Move that leg to the front, back, and sides while balancing on the grounded leg.

Multi-Directional Weight Transfers



Reverse Lunge



While standing, place one foot on a slider and plant the other firmly on the ground. Begin by sliding the foot backwards as you bend the front knee and maintain a vertical shin. Continue until either the back knee contacts the ground or you cannot maintain balance. Drive through the front leg to return to the starting position.

Lie supine with your knees flexed and your heels on the sliders. Start the exercise by pushing through your heels to bridge up at the hips. Then, allow your knees to extend by eccentrically controlling the movement until your flat on the ground with legs extended. Perform these at a slow tempo.

Hamstring Eccentrics



Single Arm Slides



In a push-up position, place one hand on a slider and the other directly on the ground. Lower your body to the ground with the grounded arm while sliding the other arm forward, back, or to the side. Push yourself back up using the grounded arm and return the opposite arm to the starting position.

- Prevent any rotation at the torso from the sliding arm.

10. Plyometric Boxes

Plyometric boxes have various uses that will allow you to perform a multitude of different exercises that you otherwise would not be able to do. These boxes provide an elevated surface, at a number of different heights, to do lower body exercises as well as work on jumping and landing mechanics. Available in stackable sets and in multiple materials (metal, wood, cushioned) you will be able to find something that works in your clinic.



Four Ways to Use Boxes:

1. Box jumps / depth jumps
 - Both are excellent drills to look at landing mechanics and how someone loads and absorbs force. Landing stiff legged results in the impact being absorbed by the hip, knee and ankle joints which increases risk of injury. It is much more advantageous for individuals to land softly and transfer the force to the surrounding musculature of the glutes, hamstrings, quads, and calves.
2. RFESS
 - Bridges the gap between bilateral and single-leg training with the assistance from the back leg for stabilization. Numerous benefits of developing balance and hip flexibility along with building strength.
3. Sit squats
 - Will help an individual own the bottom position of their squat, or simply engage the right muscles when going from a sitting to standing position.
4. Feet elevated bridge
 - Having the feet raised allows you to go through a greater range of motion, making it more difficult on the glutes and hamstrings.

Box Jumps/Depth Jumps



Box Jumps – Upright stance with feet shoulder width apart. Begin with a counter movement dropping hips down and arms back. Explosively jump up and land in a squat position on the box. Finish with hips fully extended.

Depth Jump – Start with toes near the edge of the box. Step from the box and land on the floor with both feet. You can either stick the land or immediately jump up as high as possible.

The main key points:

- Land softly with feet flat and weight evenly distributed; shift the hips back to both create power when jumping and absorb force when landing; avoid knee valgus/varus.

With your feet about shoulder width apart, place the anterior portion of your rear foot on a box. Keep your chest high as you lower your hips towards the floor with the front shin staying vertical and back knee bending. Drive through the front foot to return to your starting position.

- If balance is a limiting factor, use a PVC pipe/broomstick to stabilize.

RFESS



Sit squats



Start sitting on a box about the level at which you want to work on with squat depth. Bring your feet underneath you as far as you can with keeping heels flat on the floor and lean forward so that shoulders are positioned over the middle of your feet. Create tension throughout the body and unweight your butt off the box about 50%, pause, and then raise about one inch further.

- Don't allow compensation with momentum by rocking forward to move upwards.

Lie down on a flat surface with your heels on top of the box about hip or shoulder width apart, either legs bent at 90 degrees or completely straight. Brace your core, drive through your heels and squeeze the glutes to finish with full hip extension at the top.

- Keep knees in line with hips.
- Can progress to single leg bridges with leg bent or straight or 2-1 bridges, going up on two feet and lowering slowly with one.

Feet elevated bridge



Essential Strength Equipment for the Modern Physical Therapy Practice

Suggested Fitness Equipment Retailers

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Interested in learning how to implement modern strength and conditioning principles into your rehab programs? Check out the Institute of Clinical Excellence's Fitness Athlete Division for three courses designed to give you an arsenal of tools to improve patient outcomes.

[Essential Foundations in the Clinical Management of the Fitness Athlete](#)

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Thanks to Steph Sfara for the development of this eBook.

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Steph is currently finishing her last year of Physical Therapy school at Youngstown State University and will graduate in May 2018. Steph has remained an avid weightlifter after completing her competitive volleyball career, earning All-American recognitions in 2014. She is currently a Certified Strength and Conditioning Specialist and actively uses her training knowledge to improve patient outcomes with optimal loading in the clinic.

Steph's passion is in working with other athletes and active individuals to improve their movement, health, and achieve optimal performance.